

WDM HUMAN SERVICES - HOLIDAY SPONSOR FORM 2020

(Please Print)

Contact Name

Organization Name (if applicable)

Address

City, State, Zip

Phone

E-Mail

Have you been a sponsor in the past? ☐ Yes ☐ No

Please check the program(s) listed below for which you would like to participate:

☐ **Food Card:** Purchase food card(s) in \$25 denomination(s)* from a local grocery provider

How many food cards do you wish to provide? _____ For which holiday? _____

**Please note, food cards distributed through WDM Human Services are \$25 per household, regardless of household size.*

☐ **Adopt-A-Family Program:** Minimum Requirements: Sponsors are asked to provide gifts for the children living in the household (up to age 18) consisting of three gifts per child. Of course, you may provide more if you desire. **Gifts for the adults in the household are optional.** A grocery gift card or food basket for a holiday meal is also optional. **Please note, due to Covid-19, we are asking that gifts be delivered to the family – dropping off gifts at the Human Services office will not be an option this year.**

How many families do you wish to adopt? _____ Maximum # of kids in family: _____

Do you have any special preferences (i.e., specific genders or ages)? _____

IMPORTANT

Adopt-A-Family sponsors are asked to make direct contact with families with any questions regarding gifts, and also to make arrangements for delivery.

☐ **Gift Cards:** Please deliver gift cards for families that do not get sponsored to our office by December 11th.

☐ **Monetary Contribution:** Your contribution will be used to assist families in need during the holidays and throughout the year. **Please make your check payable to:** West Des Moines Human Services

PLEASE RETURN YOUR SPONSOR FORM OR DONATION TO:

(Deadlines: Thanksgiving – 11/10, Christmas – 12/11)

MAIL: WDM Human Services, P.O. Box 65320, West Des Moines, IA 50265-0320

DROP OFF: WDM Human Services, 139 6th St, West Des Moines, IA 50265
Monday through Friday, between 8:00 am and 4:00 pm

E-MAIL: Melinda.Hotovec@wdm.iowa.gov **FAX:** 515-222-3669

QUESTIONS: Please call Melinda Hotovec at 515-222-3663.

Thank you for your support!